

NOTICE OF CONTRACT RENEWAL

State Of Missouri
Office Of Administration
Division Of Purchasing
PO Box 809
Jefferson City, MO 65102-0809

http://oa.mo.gov/purchasing

M15C nttp://oa.mo.go

CONTRACT NUMBER	CONTRACT TITLE
CS170042004	Alternatives to Abortion Program Services
AMENDMENT NUMBER	CONTRACT PERIOD
Amendment #001	July 1, 2017 through June 30, 2018
REQUISITION/REQUEST NUMBER	SAM II VENDOR NUMBER/MissouriBUYS SYSTEM ID
NR 886 DFA18000005	43161118100/MB00097920
CONTRACTOR NAME AND ADDRESS	STATE AGENCY'S NAME AND ADDRESS
THE HAVEN OF GRACE 1225 WARREN ST LOUIS MO 63106	Department of Social Services Division of Finance & Administration Svs 221 W High Street, Room 310, PO Box 1082 Jefferson City MO 65102-1082

ACCEPTED BY THE STATE OF MISSOURI AS FOLLOWS:

Contract CS170042004 is hereby amended pursuant to the attached amendment #001, dated 08/14/17.

BUYER	BUYER CONTACT INFORMATION Email: julie.kleffner@oa.mo.gov
Julie Kleffner	Phone: (573) 751-7656 Fax: (573) 526-9816
SIGNATURE OF BUYER	DATE
Julie Klepha	8-25-17

DIRECTOR OF PURCHASING

Hours frager

Karen S. Boeger



AMENDMENT NO.: 001

CONTRACT NO.: CS170042004

TITLE: Alternatives to Abortion Program Services

ISSUE DATE: 07/31/17

REQ NO.: NR 886 DFA18000005

BUYER: Julie Kleffner PHONE NO.: (573) 751-7656

E-MAIL: Julie.Kleffner@oa.mo.gov

TO:

THE HAVEN OF GRACE

1225 WARREN

ST LOUIS MO 63106

RETURN AMENDMENT BY NO LATER THAN: 08/14/17 AT 5:00 PM CENTRAL TIME

RETURN AMENDMENT TO THE DIVISION OF PURCHASING (PURCHASING) BY E-MAIL, FAX, OR MAIL/COURIER:

SCAN AND E-MAIL TO:	Julie.Kleffner@oa.mo.gov
FAX TO:	(573) 526-9816
MAIL TO:	PURCHASING, P.O. Box 809, Jefferson City, Mo 65102-0809
COURIER/DELIVER TO:	PURCHASING, 301 West High Street, Room 630, Jefferson City, Mo 65101-
	1517

DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:

Missouri Department of Social Services
Division of Finance and Administrative Services
221 W. High Street, Room 310
Post Office Box 1082
Jefferson City MO 65102-1082

SIGNATURE REQUIRED

YENDOR NAME	MissouriBUYS SYSTEM ID (SEE VENDOR PROFILE - MAIN INFORMATION SCREEN)
The Haven of Grace	MB00097920
MAILING ADDRESS	_
1225 Warren Street	
CITY, STATE, ZIP CODE	
St. Louis, MO 63106	

CONTACT PERSON	hwinsby@havenofgracestl.org
Heather Winsby	annia, water thought desirating
PHONE NUMBER	FAX NUMBER
314-621-6507	314-241-4913
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE)	
CorporationIndividual State/Local Government P	artnershipSole Proprietor _X_IRS Tax-Exempt
AUTHORIZED SIGNATURE	DATE
A Curtan	August 14, 2017
PRINTED NAME	TITLE
Jo Curran	Interim Executive Director

AMENDMENT #001 TO CONTRACT CS1700420004

CONTRACT TITLE:

Alternatives to Abortion Program Services

CONTRACT PERIOD:

July 1, 2017 through June 30, 2018

The State of Missouri hereby exercises its option to renew the above-referenced contract and desires to amend the contract.

Effective July 1, 2017, the administrative responsibilities of the Alternatives to Abortion was transferred from the Office of Administration, Commissioner's Office to the Missouri Department of Social Services at the following address:

Missouri Department of Social Services Division of Finance and Administrative Services 221 W. High Street, Room 310 Post Office Box 1082 Jefferson City MO 65102-1082

Therefore, the all references to the state agency shall be hereby deemed to mean the Missouri Department of Social Services.

Consequently, Attachment 3 has been revised to refer to the Department of Social Services in lieu of the Office of Administration. All references to Attachment 3 shall be hereby deemed to mean the attached Attachment 3 referencing the Department of Social Services.

The General Assembly has made available additional funds for Alternatives to Abortion Program services. Therefore, pursuant to paragraph 2.12.3 b. of the RFP portion of the contract, the above-referenced contract shall be renewed for up to the maximum annual total price specified below. The contractor shall indicated in the table below the maximum annual total price for the provision of the Alternatives to Abortion Program services. In no event shall the contractor quote a price to exceed the maximum price identified in italics below. The Non-Residential Services, price per client, per month and the Residential Care Services, price per client, per month shall remain the same.

Geographic Region 6	\$_460,312.60	maximum annual total price
_	(\$463,841.07)	

The contractor must provide a budget/price analysis of the maximum annual total price and a budget narrative.

Attachment 5, attached hereto, has been revised to reflect the new contract period.

The contractor shall sign and return this document, along with completed pricing, budget/price analysis, and budget narrative, on or before the date indicated.

NOTE:

The contractor's failure to complete and return this document shall not stop the action specified herein. If the contractor fails to complete and return this document prior to the return date specified or the effective date of the contract period stated above, whichever is later, the state may renew the contract at the same price(s) as the previous contract period or at the price(s) allowed by the contract, whichever is lower.



Total Request

Alternatives to Abortion Contract NO. CS170042004

Budget		Budget Narrative
Salaries & Wages	232,368.00	Director of Programs, Program Manager,
Benefits	29,378.00	Family Advocate, Therapist, 4 House
	261,746.00	Parents
Direct Admin		
Office Utilities	24,000.00	Electric, water, sewer, trash
Facility Insurance	26,880.00	Commerical Property, General Liability
Office Supplies	2,000.00	As Stated
Office Equip/Computers	5,440.00	Computers and furniture
Office Comm/Internet	4,800.00	phone and wifi
Office Rep/Maint	32,000.00	eterminating, lawn, irrigation, snow removal
Security	1,600.00	alarm system, cameras, monitoring
Staff Development	4,000.00	training
Accounting (Grant Assistance)	3,000.00	Accounting Services
IT & Technology	8,000.00	JT Services
Consulting (6 Mos.) (Interim ED)	6,000.00	As Stated
	117,720.00	
Direct Program Basic Needs/Baby	3 500 00	Diapers, wipes, carseats, cribs, hygeine products, clothes
Cable		
Grad/Milestone		Cable services and equipment Gifts/incentives for program completion
Monthly Outings		Educational and fun outings for shelter clients
Mental Health		assesments and ciriculum for life skills
Classroom Supplies	•	As Stated
Computer Lab	-	Client computer equipment
Transportation		Bus Tickets, taxi, car rentals
Furniture		Furniture for program needs
Food	-	Groceries for shelter residents
Household Supplies		Cleaning supplies, paper products
	42,900.00	
	, -,, ,,	
Total Salaries/Benefits	261,746.00	
Total Direct Adm	117,720.00	
	379,466.00	
10% Indirect	37,946.60	
Total Program	42,900.00	_

460,312.60

Attachment 3

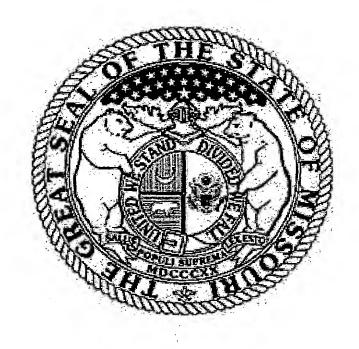
Department of Social Services

Reimbursement Request for Other Services

Program: Alternatives to A	bortion		
Contractor:			
Subcontractor:			
Please enter below the in item to be purchased, cos purchased/provided to b	t for the item, and the j	n/service to be purchased. L ustification. Items must be a	ist the date of purchase, approved before
Client Name		Date Enrolled	
Proposed Purchase Date	Item	Total Cost (include formal estimate from provider of services)	Justification, include other sources of funding that have been attempted
Amt. to be reimbursed			
travel expenses, shipping cha damages. Please subtract th Please return to Alternativ Services, Division of Finan	rges, insurance, interest, p ese charges from your toto ves to Abortion Progran ce & Administrative Ser	tems and services are not eligible cenalties, termination payments al reimbursement request prior of Manager, State of Missouri vices, Broadway State Office 12-1082. May be faxed to 573	, attorney fees, and liquidated to submission. – Department of Social Building, 221 W. High St.,
joy.e.benne@dss.mo.gov b			, 701 7070 or omanda to
Authorized person requesti	ng purchase:	D	Date
Purchase is Approved D	enied A2A Signature _	I	Date
Reason for denying purchas	e:		
<u> </u>			

A2A Quarterly Expenditure Report		
Agency: [Insert Agency Name]	Contract	Number
Program Year July 1, 2017 - June 30, 2018		
Revenue	Federal	(TANF)
Revenue Request	\$	
Indirect Administrative Costs Calculations		
Option 1: Federally Negotiated Indirect Cost Rate (FNICR)		
Application Base:	\$	
Federally Negotiated Indirect Cost Rate (FNICR): %		0.00%
Total Indirect Administrative Costs	\$	
OR		
Option 2: 10% De Minimus (use if no FNICR)		
Application Base: Modified Total Direct Administrative Cost	\$	
		109
Total Indirect Administrative Costs	s _ \$ _	-
Direct Administrative Costs	Federal	(TANF)
Program Salaries and Wages	\$	-
Employee Benefits	\$	-
Employee Travel	\$	-
Employee Training	\$	-
Office Rent/Space Office Utilities	\$	-
Facility Insurance	\$	-
Office Supplies (under \$5,000)	\$ \$	-
Equipment (Capitol Equipment over \$5,000 threshold)	\$	-
Office Communications	\$	_
Office Repairs and Maintenance	\$	_
Contract/Consulting	\$	_
Other (list):	\$	_
add other categories as needed)	\$	
Total Direct Administrative Cos	t \$	
ess:		
Equipment (Capital Equipment over the \$5,000 threshold) Contracting/Consulting (amount of each contract service over \$25,000) Other based on definition		
Modified Total Direct Administrative Cos	, 	<u> </u>
Participant Services	Federal	(TANE)
Transportation	\$	17111)
lob Training	\$	_
Fuition Assistance	\$	_
Contracted Residential Care	\$	_
Jtility Assistance	\$	-
Emergency Shelter	\$	-
lousing Assistance	\$	-
add others as needed)	\$	
Total Participant Cost	s s	<u>-</u> -
I hereby certify that the budget is taken from the original Books of Account and that valid and consistent with the terms of the contract.	budget amo	unts are
Signature of Authorized Representative of [Insert Agency Name]	Da	te
9 1. senior an september of [meet vicinity liquid]	J	

•



State of Missouri OFFICE OF ADMINISTRATION

Division of Purchasing

Contract Amendment Documentation

The following documentation consists of additional contract amendment documentation. The additional contract amendment documentation is not a part of the official contract amendment, but provides supporting information for the official contract amendment.

Kleffner, Julie

From:

Morrison, Mary Ann

Sent:

Wednesday, August 16, 2017 3:44 PM

To:

Kleffner, Julie

Subject: Attachments:

FW: Alternatives to Abortion Program Services Agreement: Haven of Grace

CS170042004-002 (Haven of Grace - FY18) APPROVED 8-16-17.pdf

Please see attached.

Thank you.

Mary Ann Morrison, Procurement Officer II

DSS/DFAS

Phone: (573) 526-3433 Fax: (573) 526-4678

Email: maryann.morrison@dss.mo.gov

From: Benne, Joy

Sent: Wednesday, August 16, 2017 3:43 PM

To: Morrison, Mary Ann

Subject: RE: Alternatives to Abortion Program Services Agreement: Haven of Grace

Mary Ann,

Please find attached the "APPROVED" budget for The Haven of Grace.

No changes were made to the original document received.

Thanks.

Joy E Benne, Fiscal Administrative Mgr.

Missouri Department of Social Services
Division of Finance & Administrative Services

Phone: (573) 751-7027 Fax: 573-751-7598

Email: joy.e.benne@dss.mo.gov

From: Morrison, Mary Ann

Sent: Tuesday, August 15, 2017 9:44 AM

To: Benne, Joy

Subject: FW: Alternatives to Abortion Program Services Agreement: Haven of Grace

Please review and advise if acceptable.

Thanks.

Mary Ann Morrison, Procurement Officer II

DSS/DFAS

Phone: (573) 526-3433 Fax: (573) 526-4678

Email: maryann.morrison@dss.mo.gov

From: Kleffner, Julie

Sent: Tuesday, August 15, 2017 9:16 AM

To: Morrison, Mary Ann

Subject: FW: Alternatives to Abortion Program Services Agreement: Haven of Grace

Please review and advise if acceptable to proceed.

Thanks

From: Nicole Feltes [mailto:NFeltes@havenofgracestl.org]

Sent: Monday, August 14, 2017 5:00 PM
To: Kleffner, Julie < Julie. Kleffner@oa.mo.gov >

Cc: Benne, Joy < Joy. E. Benne@dss.mo.gov >; Jo Curran < jcurran@havenofgracestl.org >; Heather Winsby

<Hwinsby@havenofgracestl.org>

Subject: Alternatives to Abortion Program Services Agreement: Haven of Grace

Hello Ms. Kleffner,

Please see attached documents and let me know if you have any questions.

Kindest Regards,

Nicole Feltes

Director of Programs

Office: 314-621-6507 Cell: 314-323-8375

The Haven of Grace 1225 Warren St. St. Louis, MO 63106

mission

Serving women who are young, pregnant, and homeless, we provide a safe, nurturing home, educational programs and long-term support for mother and child. Founded in faith, we instill hope, dignity and the pride of independence, one family at a time.

MEMORANDUM

Office of Administration Division of Purchasing

TO:

Laura Ortmeyer

FROM:

Julie Kleffner

DATE:

July 19, 2017

RE:

Renewal/Amendment to the Alternatives to Abortion Program Services Contracts

The Department of Social Services has requested the Alternatives to Abortion Program Services contracts, CS170042001 through CS170042009, be renewed with a funding increase pursuant to House Bill 11, section 11.120, lines 2 through 6. Pursuant to paragraph 2.12.3 b. of the RFP portion of the contract, funds may increase at the time of renewal if funds are appropriated by the General Assembly.

The contracts are also being amended as follows:

- 1. The administrative responsibilities of the Alternatives to Abortion Program transferred from the Office of Administration to the Department of Social Services.
- 2. As a result of the transfer of administrative responsibilities, Attachment 3 is being revised to reflect the correct state agency.
- 3. Attachment 5 is being revised to reflect the appropriate contract period.

Due to the legislature including a rate increase in the Fiscal Year Budget via House Bill 11 (see attached) and is allowed by paragraph 2.12.3 b. of the contract, I am processing the renewal to the contracts allowing a price increase.

Additionally, 1 CSR 40-1.050 (8) states, "Contracts awarded as the result of a competitive solicitation may be amended when such an amendment is in the best interest of the state and does not significantly alter the original intent or scope of the contract."

Therefore, since the intent and scope of the contract are not altered, I am proceeding to amend the contract as requested.

Kleffner, Julie

From:

Benne, Joy

Sent: To: Wednesday, July 19, 2017 3:42 PM Morrison, Mary Ann; Kleffner, Julie

Subject:

RE: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

Attachments:

RE: A2A FY18 Funding

Please see the attached email from Laclede County Pregnancy Center stating they do not want the increased funding for FY18. Thanks

Joy E Benne, Fiscal Administrative Mgr.

Missouri Department of Social Services Division of Finance & Administrative Services

Phone: (573) 751-7027 Fax: 573-751-7598

Email: joy.e.benne@dss.mo.gov

From: Morrison, Mary Ann

Sent: Wednesday, July 19, 2017 3:39 PM

To: Kleffner, Julie **Cc:** Benne, Joy

Subject: RE: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

In addition to response (2), Laclede County Pregnancy Support Center communicated with DSS they did not want the increased funding for FY18. Let me know if you need the documentation and I'll get it from the Program. Thanks.

Mary Ann Morrison, Procurement Officer II

DSS/DFAS

Phone: (573) 526-3433 Fax: (573) 526-4678

Email: maryann.morrison@dss.mo.gov

From: Morrison, Mary Ann

Sent: Wednesday, July 19, 2017 3:29 PM

To: Kieffner, Julie Cc: Benne, Joy

Subject: RE: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

Thank you!

In response to (1), funding increase was based on HB 11, section 11.120 lines 2 through 6 minus 3% Governor's reserve on the general revenue portions (line 4) and per DSS upper management, line 6 funding amount was not included (if you need a copy of the HB, just let me know.

In response to (2), funding allocation approximate percentage was taken from section 3.3.2 of the RFP. This percentage was multiplied against the total funding allocation available for FY18 (HB11, section 11.120, lines 4 through 6) which gave the amount of funding for each of the 9 regions. Each region amount was based on # of awards made for each region as outlined in subsection of 3.3.2. Determination on who received the highest percentage is based on ranking from the evaluation process.

Please let me know if there is any additional information needed.

Mary Ann Morrison, Procurement Officer II

DSS/DFAS

Phone: (573) 526-3433 Fax: (573) 526-4678

Email: maryann.morrison@dss.mo.gov

From: Kleffner, Julie

Sent: Wednesday, July 19, 2017 1:05 PM

To: Morrison, Mary Ann

Subject: RE: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

I will get something drafted for your review.

Please provide (1) an explanation (e-mail/memo) explaining why funds have increased and (2) an explanation how funding for each contractor was determined for inclusion in the contract file.

Thank you

From: Morrison, Mary Ann

Sent: Wednesday, July 19, 2017 12:50 PM

To: PURCHMAIL < purchmail@oa.mo.gov >; Ortmeyer, Laura < Laura.Ortmeyer@oa.mo.gov >; Kleffner, Julie

<<u>Julie.Kleffner@oa.mo.gov</u>>

Subject: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

In reference to NR 886 DFA18000005, please renew Alternatives to Abortion contracts/ CS170042001-009. The attached backup documentation includes the amendment verbiage, updated attachments and FY18 budget amounts for each contract (column I).

Prior to sending out for signature, please provide a copy of the amendment for program review.

Please contact me with any questions.

Thank you.

Mary Ann Morrison, Procurement Officer II

Missouri Department of Social Services Division of Finance & Administrative Services 615 Howerton Court P.O. Box 1643 Jefferson City, MO 65102-1643 Phone: (573) 526-3433 Fax: (573) 526-4678

Email: maryann.morrison@dss.mo.gov

Confidentiality Notice: This electronic communication is from the Missouri Department of Social Services (DSS), Division of Finance & Administrative Services, and is only intended for its addressee. This communication may contain information that is privileged, confidential or otherwise protected from disclosure by law and/or DSS policy. If you are not the intended recipient, or the employee or agency responsible for delivering this information to its recipient, do not copy, circulate, forward or otherwise disclose this document. If you have received this message in error, please notify the sender immediately by return email at maryann.morrison@dss.mo.gov or by phone at 573-526-3433.

Kleffner, Julie

From:

Abigail Chisom <abigail@psclebanon.org>

Sent:

Tuesday, July 18, 2017 12:23 PM

To:

Benne, Jov

Subject:

RE: A2A FY18 Funding

Hi Joy,

Since things have changed with the maternity home funding method we haven't used as much funding. I think we better stay with our original amount at this time so the money can be put to good use elsewhere.

Thank you.

Abigail Chisom Assistant Director Laclede County Pregnancy Support Center 417-532-8555

From: Benne, Joy [mailto:Joy.E.Benne@dss.mo.gov]

Sent: Tuesday, July 18, 2017 11:57 AM

To: 'Abigail Chisom'

Subject: A2A FY18 Funding

Abigail,

Question for Laclede County Pregnancy Support Center....For FY2018 the A2A program was given additional funding. Would Laclede County Pregnancy Support Center be able to spend the extra funding in FY2018 if awarded?

We are possibly looking at more than what was stated for maximum annual total price on the contract award page from OA. DSS wants to make sure everyone can use the extra funding without lapsing any.

Joy E Benne, Fiscal Administrative Mgr.

Missouri Department of Social Services
Division of Finance & Administrative Services
Broadway State Office Building
221 W. High St., Room 310
P.O. Box 1082
Jefferson City, MO 65102-1082

Phone: (573) 751-7027 Fax: 573-751-7598

Email: joy.e.benne@dss.mo.gov

Confidentiality Notice: This electronic communication is from the Missouri Department of Social Services (DSS), Division of Finance & Administrative Services, and is only intended for its addressee. this communication may contain information that is privileged, confidential or otherwise protected from disclosure by law and/or DSS policy. If you are not the intended recipient, or the employee or agency responsible for delivering this information to its recipient, do not copy, circulate, forward or otherwise disclose this document. If you have received this message in error, please notify the sender immediately by return email at jov.e.benne@dss.mo.gov or by phone at 573-751-7027.



AMENDMENT NO.: 001

CONTRACT NO.: CS170042004

TITLE: Alternatives to Abortion Program Services

ISSUE DATE: 07/31/17

TO:

VENDOR NAME

THE HAVEN OF GRACE

1225 WARREN

ST LOUIS MO 63106

REO NO.: NR 886 DFA18000005

BUYER: Julie Kleffner PHONE NO.: (573) 751-7656

E-MAIL: Julie.Kleffner@oa.mo.gov

MissouriBUYS SYSTEM ID (SEE VENDOR PROFILE - MAIN INFORMATION SCREEN)

RETURN AMENDMENT BY NO LATER THAN: 08/14/17 AT 5:00 PM CENTRAL TIME

RETURN AMENDMENT TO THE DIVISION OF PURCHASING (PURCHASING) BY E-MAIL, FAX, OR MAIL/COURIER:

SCAN AND E-MAIL TO:	Julie Kleffner@ox.mo.gov
FAX TO:	(573) 526-9816
MAIL TO:	PURCHASING, P.O. Box 809, Jefferson City, Mo 65102-0809
COURIER/DELIVER TO:	PURCHASING, 301 West High Street, Room 630, Jefferson City, Mo 65101-
	1517

DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:

Missouri Department of Social Services
Division of Finance and Administrative Services
221 W. High Street, Room 310
Post Office Box 1082
Jefferson City MO 65102-1082

SIGNATURE REQUIRED

The Haven of Grace	MB00097920
MAILING ADDRESS	
1225 Warren Street	
CITY, STATE, ZIP CODE	
St. Louis, MO 63106	
CONTACT PERSON	hwinsby@havenofgracestl.org
Heather Winsby	
Phone number	FAX NUMBER
314-621-6507	314-241-4913
vendor tax filing type with irs (check one)	
	artnershipSole Proprietor _X_IRS Tax-Exempt
AUTHORIZED SIGNATURE	DATE
Alewan	August 14, 2017
PRINTED NAME	TITLE
Jo Curran	Interim Executive Director

AMENDMENT #001 TO CONTRACT CS1700420004

CONTRACT TITLE:

Alternatives to Abortion Program Services

CONTRACT PERIOD:

July 1, 2017 through June 30, 2018

The State of Missouri hereby exercises its option to renew the above-referenced contract and desires to amend the contract.

Effective July 1, 2017, the administrative responsibilities of the Alternatives to Abortion was transferred from the Office of Administration, Commissioner's Office to the Missouri Department of Social Services at the following address:

Missouri Department of Social Services Division of Finance and Administrative Services 221 W. High Street, Room 310 Post Office Box 1082 Jefferson City MO 65102-1082

Therefore, the all references to the state agency shall be hereby deemed to mean the Missouri Department of Social Services.

Consequently, Attachment 3 has been revised to refer to the Department of Social Services in lieu of the Office of Administration. All references to Attachment 3 shall be hereby deemed to mean the attached Attachment 3 referencing the Department of Social Services.

The General Assembly has made available additional funds for Alternatives to Abortion Program services. Therefore, pursuant to paragraph 2.12.3 b. of the RFP portion of the contract, the above-referenced contract shall be renewed for up to the maximum annual total price specified below. The contractor shall indicated in the table below the maximum annual total price for the provision of the Alternatives to Abortion Program services. In no event shall the contractor quote a price to exceed the maximum price identified in italics below. The Non-Residential Services, price per client, per month shall remain the same.

		the state of the s
Geographic Region 6	\$ 460,312.60	maximum annual total arioa
Cograpine Region o	Φ_400,314,00	maximum annual total price
	(04/2 041 07)	, 1
	(\$463,841.07)	1

The contractor must provide a budget/price analysis of the maximum annual total price and a budget narrative.

Attachment 5, attached hereto, has been revised to reflect the new contract period.

The contractor shall sign and return this document, along with completed pricing, budget/price analysis, and budget narrative, on or before the date indicated.

NOTE:

The contractor's failure to complete and return this document shall not stop the action specified herein. If the contractor fails to complete and return this document prior to the return date specified or the effective date of the contract period stated above, whichever is later, the state may renew the contract at the same price(s) as the previous contract period or at the price(s) allowed by the contract, whichever is lower.



Total Request

Alternatives to Abortion Contract NO. CS170042004

Budget		Budget Narrative				
Salaries & Wages		Director of Programs, Program Manager,				
Benefits	Manufacture and Alexander and Alexander	Family Advocate, Therapist, 4 House				
	261,746.00	Parents				
Direct Admin						
Office Utilities		Electric, water, sewer, trash				
Facility Insurance		Commerical Property, General Liability				
Office Supplies	2,000.00	As Stated				
Office Equip/Computers	5,440.00	Computers and furniture				
Office Comm/Internet	4,800.00	phone and wifi				
Office Rep/Maint	32,000.00	eterminating, lawn, irrigation, snow removal alarm system, cameras, monitoring training Accounting Services IT Services				
Security	1,600.00					
Staff Development	4,000.00					
Accounting (Grant Assistance)	3,000.00					
IT & Technology	8,000.00					
Consulting (6 Mos.) (interim ED)	6,000.00	As Stated				
	117,720.00	nu				
Basic Needs/Baby		Diapers, wipes, carseats, cribs, hygeine products, clothe				
Direct Program		·				
Cable		Cable services and equipment				
Grad/Milestone	· ·	Gifts/incentives for program completion				
Monthly Outings		Educational and fun outings for shelter clients				
Mental Health	·	assesments and ciriculum for life skills				
Classroom Supplies		As Stated				
Computer Lab		Client computer equipment				
Transportation		Bus Tickets, taxi, car rentals				
Furniture		Furniture for program needs				
Food		Groceries for shelter residents				
Household Supplies	· ·	Cleaning supplies, paper products				
• •	42,900.00					
Total Salaries/Benefits	261,746.00					
Total Direct Adm	117,720.00					
	379,466.00	•				
10% Indirect	37,946.60					
Total Program	42,900.00					
Total Decises	450 242 50	•				

460,312.60

PURC	HASING	CO	NTRACT AME	NDMENT R	OUTING	GUII	DE JK C	<u>917004</u>	2004 A# (201 8.1		
JR 88	SG DEF	150031/	OS Re	vised 08/17/15	5				<i>'</i>			
1. I	ndicate C	ontract Amen	dment Type			100			**			
RENE	WAL:		RIOD OF 3		TOTAL	. }						
	Renewal - % Increase Cost Savings Renewal - \$ Increase Cost Savings Renewal - W/O Increase					Peri	Performance Security Deposit: \$					
]						
						Sur	Surety Bond: \$					
	SFS Renewal – Prices In Original Contract SFS Renewal – Prices Not in Original Contract XTENSION PERIOD:											
							Annual Wage Order Number: Annual Wage Order Date: County(ies):					
EYTE												
						Cou	nty(les)					
•	Extension – 30-Day Termination Extension - \$ Increase Cost Savings Extension – W/O Increase					1						
						Out	Other Instructions:					
						Cun						
	Assignm					1						
		ation/Terminati	on									
SECTION SEC	world a served out on the contract of the cont	mendment			attended to the second							
		Direction and action of the second of the se	3630				This					
. P	reliminar	y Tasks/Verif	cations				The transfer					
A	. Section	on 34.040.6, RS	SMo			Buy	er/Section Sup	port	ال	1731-17		
B	. Purch	asing Suspensi	on List				er/Section Sup		10	7-31-17		
C		al Suspension -					er/Section Sup		T TOTAL	7-31-17		
Ē			IDC Contractor	Debarment Li	ete		er/Section Sup		-01-	17-51-1		
E			ion Commitment			+ 2003	ciroccion oup	port	-			
1			Renewal – Blind			Buy	AT					
F			ation – Insert Ad			1 Buy	<u> </u>					
1 1	applic		ation - miser Au	vertising Date	, 11	Dur				-		
P					W E Silve	Buyer/Section Support				7		
		ontract Amend		70.00		Buy	er/section Sup	роп	_ <i></i>	7-31-17		
		prove Contra	ct Amendment (n Signature	nature		D		00/	7 7 77		
	(equired)					Buy			CAC	7.31.17		
	nitial	Supervisor		Section	LC	1	Asst		Director			
	ate		1	Manager	81		Director	1				
			endment (If Sig	nature Requ			Section Suppo			8-1-17		
		E-Mail Addres			ave	nta	haven of	araces	HI.ora	1		
		cy Contact E-M		Mai	u fr	Λ	Norrison	0				
		040.6, RSMo, I		Follow-U								
P	Leview Co	utract Amend	ment Response	- Verification	13							
A		wal/Extension I				Buye	r/Section Supp	ort	7	1		
B	. Section	on 34.040.6, RS	Mo		-11		r/Section Supp		1			
C			y Deposit/Surety	Rond		-	r/Section Supp		1			
D						Buyer			1	1		
E		ewal/Extension with Cost Savings Language				Buye						
	F. SFS Authorized Limit \$											
G						Buyer						
[7									-	į		
				nentation	<u> </u>	Buyer/Section Support			<u> </u>			
		ssignment and					r/Section Supp					
	3. Purchasing Suspension List						r/Section Supp					
	4. Federal Suspension – SAM.GOV				Buye	r/Section Supp	ort					
	5. La	bor Stds - OA/	FMDC Contract	or Debarment	Lists	Buye	r/Section Supp	ort]			
-1 "-	Prepare C	Contract Amer	dment Award l	Document/St	atewide				1			
	Notice				8	Buve	r/Section Supp	ort	17	10-22-17		
	Review/A	pprove Contra	ct Amendment	Award Docu	ment	Buye				8.2277		
	Initial	T 34		Section	L		Asst	7				
	Date	Supervisor		Manager	Bla		Director		Director			
		ontract Amen	dment	Using 21	1 012		r/Section Supp	ort	$\overline{O^{7}}$	8125117		
	Process Contract Amendment AM 300 PMM () () () () () () () () () (1010011			
						r/Section Supp		- 	865117			
_						Buyer/Section Support			J	cle=tim		
	E-Mail/Fax NOA to Contractor/Assignee & Agency Contact				Buyer/Section Support				8135/17			
	Copy/Save As Statewide Notice to Internet Folder					Buyer/Section Support						
						Centr	Central Support-Participation					
	Image Contract & mandagent Packet					Control Cupport Inspire			The state of the s	N 10		